This FINANCING STATEMENT is presented to THE FILING OFFICER for filing for record in the real estate records:

1 Debtor(s) (Last Name First) and address(es)

ROGERS, WAYNE E.
ROGERS, JOYCE M
11115 LIMO DELAWARE RD
COGGON, IA 52218

2 Secured Party(ies) and address(es)

ROGERS HOMES INC, ILC
1010 E. 1ST RD
MARION, IA 52302

3 For Filing Officer (Date, Time, Number, and Filing Office)

FILED
1998 JUN -9 AM 10:11
RECORDER
DELAWARE CO., IOWA

4 This Financing Statement covers the following types or items of property:

MANUFACTURED HOME 1998 MAN 040160 AIRA
SERIAL SFTA06209
MANUFACTURED HOME 1997 CMH 28006 ACAA
SERIAL 23976 18106

5 Name and Address of Assignee

UNITED SECURITY SAVINGS BANK FSB
565 MARION BLVD
MARION, IA 52302

6 Check appropriate box(es). The above goods are or are to become fixtures on ☐ The above timber is standing on ☐ The above minerals or the like (including oil and gas) or mineral accounts will be financed at the wellhead or minehead located on ☒ (Describe real estate below. See instruction #4):

Parcel A Pt of SW
SECTION 35, TOWNSHIP 88 NORTH 87, RANGE 6 WEST OF PM DELAWARE COUNTY,,IOWA
ACCORDING TO PLAT BOOK 7, PAGE 182.

RELEASED
This 4th day of June 19 98
Deborah L. Peyton
DELAWARE COUNTY RECORDER

The name of a record owner is WAYNE E ROGERS AND, JOYCE M ROGERS

7 ☐ Products of collateral are covered.

Debtor(s) acknowledge(s) receipt of a copy of this instrument.

X8 _____ X Joyce M Rogers
Signature of Debtor — Signature of Debtor

WAYNE E. ROGERS — JOYCE M. ROGERS
Type or Print all names (Iowa Code 335.2) — Type or Print all names (Iowa Code 335.2)

Secured party or other appropriate signature may be substituted for debtor(s) signature only in cases covered by UCC 9-402(2), 9-408 and 11105, and must be identified when substituted.

TERMINATION STATEMENT: This statement is presented to a Filing Officer for filing for record pursuant to the Uniform Commercial Code. The Secured Party certifies that a security interest no longer is claimed under the financing statement bearing the real estate number shown above. No fee is required for filing a termination statement.

Date June 3 19 98

By United Security Savings Bank FSB
Kari Helms Cust. Serv. Rep
(Signature of Secured Party or Assignee of Record. Not Valid Unless Signed.)

Form Approved (1-2-87) By: ELAINE BAXTER, Secretary of State

DATE 6-9-98 BOOK 140 PAGE 151 DATE 4-6-98 BOOK 139 PAGE 108

3 FILING OFFICER COPY - EVIDENCE OF FILING

85-3844
DELAWARE COUNTY, IOWA
FILED

1998 JN -4 AM 10: 47

BOOK 140 PAGE 151
DEBORAH L. PEYTON
DELAWARE CO. RECORDER
16.00

United Security Sup Bank
P.O. Box 186
Manion IA
52302-0186

RELEASED

This ____ day of _____, 19__

DELAWARE COUNTY RECORDER